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An
Inaugural Dissertation
on
Hypochondriasis
by
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This is an affection which is often met with, and proves not only the source of most exquisite misery to those who are the subjects of it, but it not unfrequently baffles the skill and exhausts the patience of the practitioner, so that the unhappy sufferer is left to sink into all the horrors of confirmed Melancholy, or to drag on a weary and hopeless existence.

Hypochondriasis, (in the strict sense of the term) is most frequently found in persons of the Melancholic temperament, and rarely appears before the age of Manhood.

Its remote and proximate causes are various, and they may be either mental or physical; though by some it is supposed to depend entirely upon the former, and by others on the latter.

Intense study; & an inactive & sedentary life, are apt to induce this affection,

because a due proportion of exercise, is absolutely necessary to the health and well being of man and most other animals; the sudden disappointment of any favourite object, and the constant recollection of such loss; anxiety of mind; being long kept in a state of suspence; the immoderate use of intoxicating liquors; crude, flatulent, or unwholesome food; immoderate venery, or long continued evacuations; and obstructions in the viscera, are among the most common causes.

Dr Cullen's definition of Hypochondriasis, is perhaps the very best; "A languor, listlessness, or want of resolution and activity with respect to all undertakings; a disposition to seriousness, sadness, and timidity; as to all future events, an apprehension of the worst or most unhappy state of them; and therefore, often upon slight grounds, an apprehension of great evil. Such persons, are particularly attentive to the state —

of their own health, to even the smallest change of feeling in their bodies; and from any unusual feeling, perhaps of the slightest kind, they apprehend great danger and even death itself."

In certain cases there are different symptoms, dependant upon peculiarities in the remote causes. I have known the patient to be remarkably fearful of those, to whom in health he was most strongly attached; and at times he was seized with an extravagant fit of generosity, and at others he was miserly in the extreme. Costiveness is not always an attendant upon this disease, {though regularity of the alvine evacuations, is not to be expected} neither are spasmodic pains in the head or other parts of the body; but the complaints of the patient are very numerous and diversified, so much so, that a history of them would be tedious, and would disclose perhaps nothing of importance. There is much

-difference of opinion, respecting the original-
seat of Hypochondriasis; and it seems that the
advocates of either supposition, have not made
sufficient allowances for the intimate connec-
-tion and sympathy existing between the Stom-
-ach and Brain. That it may be either a
gastric affection from the beginning, or a men-
-tal one, may I think be proved by the follow-
-ing examples.

Supposing that misfortune or
disappointment in the attainment of, any-
important object; or any thing which creates
great anxiety of mind, should occur in an-
individual of the melancholic temperament,
and whose digestive organs should be at the
time, in the performance of their healthy func
-tions; which is the part first affected? Does
the disease here depend upon torpor of the
brain, thereby producing the same effects on the
stomach and system generally? Again; a-

person in high life, living without care or anxiety, indulges himself, in every luxury, to great excess; he perseveres in this course untill the digestive system is indirectly debilitated, and there arise all the symptoms of Hypochondriasis. May not either of these cases be referable to this law of the animal economy, viz; that a high degree of excitement is uniformly succeeded by a proportionate languor and debility?. If the mind is powerfully excited by any cause, this excitement cannot continue always, there must be intervals of depression or torpor, and may not the functions of the primæ viæ be also slowly and languidly performed, in consequence of their dependance on the brain? In the first instance, if the causes of mental affliction had not existed, and the functions of the digestive apparatus being in healthy action, would the disease have arisen?; and in the second instance; if this person had not persevered so far in —

debauchery and excess as to produce an indirect-debility of the stomach, would he not have escaped it entirely?

The cases above adduced are certainly not imaginary, but are frequently to be met with, and are I think sufficient to allow of this inference, namely; that the stomach is sometimes the primarily affected part; and that the brain is also at times, the organ first affected. There are persons who are exceptions to both the above-mentioned instances, being hereditarily predisposed to the disease, being of the Melancholic temperament, or constitution, and of course liable to disorders of the primæ viæ.

Dr Cullen supposes Hypochondriasis to consist in a want of activity, and Dyspepsia in a deficiency of tone {as he expresses it} of the muscular fibres of the stomach. Dyspepsia often attacks persons of the sanguine temperament, and in youth; and though there may-

be more or less affection of the mind attendant on it; yet it is easily dispelled, and does not put on the essential characteristics of Hypo-chondriasis. It is not to be supposed however, that digestion is entirely the effect of muscular action; it is the result of an action which is sui generis; and therefore Dyspepsia may perhaps be owing to a diseased secretion of the Gastric fluid. But, as there is more or less of indigestion, attendant on Hypochon-driacal patients, it may arise either from that want of activity which pervades the system, and particularly the stomach, inducing a secretion of the gastric liquor, imperfect as to quantity, or it may be a diseased product of secretion.

It is not very probable, that we shall ever be able to ascertain the real truth in these cases, but as it is, our modes of practice all tend to one point; namely; to restore the healthy action of the stomach, and of course, that of-

all other parts sympathetically affected.

The stomach has been termed by a distinguished teacher, the "throne of the vital principle, from which would seem to emanate an influence that, diffused over the system, preserves the order of the parts, and sustains the vigour, tone, and well-being of the whole animal economy." From its almost universal sympathy with the parts of the body, it would seem that this title is not undeservedly given to it. Instances of this intimate connexion we repeatedly see. Concussion of the brain is followed by nausea and vomiting; a blow on the stomach producing instant death, would nearly lead us to suppose that life itself, held its seat there; sudden injuries of the testicles produce vomiting in some cases; and spasms of the stomach, have been known to occasion depraved vision; its sympathy with the skin is too well known, to render it

necessary for me to dwell upon it, and the celebrated adage of "Languido ventriculo, omnia languent," contains much of pathological truth, and practical information.

On examining and tracing the numerous and extensive ramifications of the Sympathetic nerves and Par Vagum, we are at once induced on the basis of such knowledge, to account for that disturbance of mind which is a concomitant of morbid irritation of the viscera to which they are distributed; and are taught not to refer all the complaints of an Hypochondriac to imagination alone, for very often, the pains and inexplicable sensations attributable to external and remote parts, do actually proceed from the disturbance of internal nerves. Do we not see this exemplified in other disorders? when the liver is affected with inflammation, there is pain in the right shoulder; in the disease of the

hip joint, the patient often only complains of pain in the knee; and it is now generally supposed that the Tic doloureux, is referable to disorder of the Stomach. A number of other facts might be adduced in confirmation of the truth of this inexplicable operation of sympathy between different parts of the body, and especially of that which so peculiarly exists between, and so intimately connects the digestive apparatus with the whole system.

To return however, more immediately to the subject under consideration, I shall observe, it is my opinion that the brain may be primarily disordered in Hypochondriasis, thereby producing either a want of activity, or a morbid degree of action in the stomach; but yet it must be confessed that in the generality of cases, the disease is essentially and obviously owing to gastric derangements. I hope that the foregoing observations

will not be considered as misplaced, and therefore now proceed to mention some of the principal symptoms of this affection as they appear in the body. Indigestion, is, I will venture to say, almost without exception one of its symptoms; flatulency, and acid eructations; costiveness; giddiness; dimness of sight, and palpitations; cold feet; {this last is a pretty constant concomitant} morbid vigilance; a sallow colour of the skin, it being at the same time cool and dry. There is torpor of the whole system, particularly of the stomach and alimentary canal, digestion and assimilation are slowly performed.

The patient also feels better in the afternoon, than in the morning; he generally goes reluctantly to bed, and is often disposed to lie late in the morning.

The symptoms of Hypochondriasis as they appear in the mind and conduct of the

patient are innumerable; there is no disease with which he does not fancy himself to be affected, and the obstinacy that is sometimes manifested by him in persisting in such ideas is truly surprising. It will be sufficient however for present purposes, to repeat Dr Cullen's excellent definition of it; "A languor, listlessness, or want of resolution and activity, with respect to all undertakings; a disposition to seriousness, sadness, and timidity; as to all future events, an apprehension of the worst or most unhappy state of them; and therefore, often upon slight grounds, an apprehension of great evil. Such persons are particularly attentive to their own health, to even the smallest change of feeling in their bodies; and from any unusual feeling, perhaps of the slightest kind, they apprehend great danger, and even death itself." This description of Hypochondriasis is like most other of Cullen's

descriptions of diseases, concise, and accurate.

If the remote cause of the disorder under consideration, be of a mental nature, or proceeds from misfortune, disappointment, or anxiety of mind, our prognosis will in general be unfavourable; but if it can be traced to disorder of the stomach and primæ viæ alone, we shall have a much better prospect of success in removing it altogether; for in the former case, the remote causes are not, and in the latter they are under our controul.

Perseverance, in either case, is of primary importance; for the want of it, there have been many left to sink into the lowest and most desponding state, from which it was utterly impossible to recover them. It is necessary, (though sometimes very difficult) for the practitioner to gain in as great a degree as possible, the confidence of the Hypochondriacal patient; as-

without this, it will be impossible to carry into effect the remedial means he may have in view; and indeed, if the confidence of the patient can be gained, it is a considerable step in itself, towards releiving him.

Towards obtaining this end, it will be proper, apparently to agree with him in all his hallucinations, as by so doing, we have numerous cases on record, in which the happiest results have been produced; indeed it is useless to attempt reasoning with an Hypochondriac, for his conviction of the reality of his present sensations, and future fears is generally firm, and not easily shaken. Ridicule should seldom or never be employed, as by this the patient is rendered more obstinate in the belief, that he is the most miserable and persecuted being in existence, and therefore the timidity, distrust, and suspiciousness, accompanying the complaint —

will be aggravated. It is true that ridicule has in some instances proved beneficial, as in the case of a man who fancied himself a plant, and insisted on being regularly watered; one of his companions, instead of pouring water on him from the spout of a teapot urinated upon him; his resentment was so great that it effected a complete cure. Such means however, are liable to do more harm than good in most cases.

The necessity of kindness and compassion to Hypochondriacal persons, and especially to those in whom the disease has been brought on by misfortune, or anxiety of mind, is obvious; in such persons there is very little of Stoicism, their minds are in a directly opposite state, and require support and sympathy; by such conduct we may succeed in doing away that timidity, and distrust of mankind, which is so great a source of

unhappiness to the patient. After establishing ourselves in the good opinion of the patient, it will be right to resort to those means most likely to be of service, with this proviso however; not to disgust him by too rigid an enforcement of orders, and to change or disguise the remedies as often as is consistent with benefit, because it is another perplexing circumstance attending the disorder that the patient is very fickle, and is easily fatigued by a regular administration of medicine.

The Hypochondriac is apt to fly for relief to quick medicines, and nostrums, which we every day see blazoned forth as infallible remedies for all diseases and which have in reality little or no efficacy in removing those complaints for whose cure they are recommended. Besides, by cheating the patient not only of his money, but also of his health, these nostrums

and their venders are the cause of serious injury; Not being possessed of properties equivalent to the removal of the morbid action of the stomach which so generally exists in this affection, it is prolonged and becomes inveterate {if the term may be used} the mind is probably irrecoverably ruined and debilitated. Whereas, by the timely and judicious application of proper remedies and treatment, the disease may be eradicated, and the patient restored to sound health and correct judgement.

There is also another reason why every physician who has correct ideas of medical science, should combat the barefaced falsehoods and impositions that are circulated and exercised with regard to these vital elixirs, and grand restoratives of nature, they constitute one among numerous other impediments to the progress of just and --

-rational practice.

It may be proper in this place to consider the treatment best adapted to Hypochondriasis; the preceding observations respecting the conduct to be observed in our intercourse with the patient, are not I presume out of place for reasons there given. The indications of cure I shall arrange under two general heads; First, to alleviate or remove the disorder of the primæ viæ; and secondly, to strengthen and invigorate the general system by means hereafter to be pointed out.

As before observed, indigestion is almost always a concomitant of this disease, & is often in a considerable degree the essential cause of it; our attention must therefore be directed to its treatment principally, as if we do not relieve it, all other means will doubtless-

prove ineffectual.

Emetics would seem to be serviceable by removing the acid or other injurious matters which oppress the stomach, and occasion great uneasiness to the patient; they will also prove of utility by exciting the action of the stomach and brain, and by determining to the surface which is generally dry and cold.

The same rules are to be observed in the administration of emetics in this case as in others, namely, if the pulse is preternaturally full and strong, we should premise bloodletting; {and according to Dr Rush, this latter is of much service itself, either when the pulse is tense or full; or depressed, without fullness or tension.}

Some have advised emetics to be given in nauseating doses only, and

others, that they should be repeatedly administered, and of the most active kind. As it is well known that the stomach in the disease I am now treating of, loses a good deal of its susceptibility to the action of medicines, there cannot be much question as to the propriety of the last-mentioned practice. By the convulsive action which they excite, the body not only is roused but the mind also; by the same means visceral obstructions {which of themselves often produce and keep up this disease} are removed, and tone is imparted to the alimentary canal and its assisting organs. The antimonial preparations, from the extensive and permanent influence they exert, and from their tendency to equalize excitement, are best adapted to this purpose, and of them the tartarized antimony is to be preferred. It is true

that emetics are very disagreeable to most persons, and will often be rejected when their administration is proposed; but this is no argument against their utility.

If acidity, accompanied with acrid eructations, prevails to any extent, it will be proper to correct it by the alkaline and absorbent medicines; of these the Calcined Magnesia {more particularly if this state of the stomach is accompanied with constipation} is an excellent remedy; Lime water, and Milk, or an alkaline preparation of clean hickory ashes infused in water, are also useful.

The exhibition of Purgatives in complaints of this nature, is of great antiquity, and they are certainly of eminent service. There have been doubts, whether the milder or more active kinds of these medicines, should be preferred; but

as was observed while speaking of emetics, the alimentary canal is in a state of torpor or insusceptibility to impressions, and if this is a correct view of the subject, it is certain that the more active purgatives are the most appropriate.

Their modus operandi in these cases is too well known to need any comment from me; they overcome the habit of constipation, occasion a revulsion of blood from the head, emulge the liver and tend to remove obstructions; they also equalize excitement, a matter of much importance in this disorder. Calomel, Jalap, Aloes, and Rhubarb are excellent medicines for this purpose, and their administration must of course be regulated according to the peculiar circumstances of the case. The Rhubarb is undoubtedly a medicine of great utility.

as at the same time that it promotes the alvine discharges, it imparts tone & vigour to the intestines. {Salivation has been recommended by Dr. Rush and others, with a view to revolutionize the system; and it has been observed by the former that it will be of still more service, if it excite the patient's resentment against his physician or friends. An attack of Erysipelas, or of Itch, has entirely removed the complaint; and it has been proposed to excite frequent and severe urtication with a view to the same effects.} The diet of the patient should be regulated according to the existing state of the system. All matters liable to become ascescent, or to increase any morbid acid they may meet with in the stomach, are to be carefully avoided; therefore animal food should be-

preferred, and it should be taken solid.

As little drink should be taken as possible with the patient's meals. When circumstances admit of it, Madeira, or other sound wines in moderate quantities and properly diluted, will be useful, by their exhilarating and tonic properties. Ardent spirits, to which the Hypochondriac is apt to have recourse, cannot be too strongly reprobated, as their use in such cases will inevitably ruin the stomach, and oblige the miserable sufferer to drag on a life supported by artificial means; and may seriously injure the mental faculties, already too much deranged. Opium may sometimes be allowed.

As tonics, the different preparations of Iron; the Oxide of Bismuth &c, have been much employed. The former certainly posses excellent properties, from the —

lasting impression they make on the Stomach and general system. The prepared Rubigo Ferri of the shops, or carbonate of iron; the Tinctura muriatis Ferri; preparations of iron scales from the forge &c, are the medicines which will suit very well in the cases of which I am treating.

To cooperate with the internal exhibition of tonic medicines, we have the warm, and cold baths; these, notwithstanding the difference of temperature, are not unlike in their effects on the body; the one proving a direct, and the other an indirect stimulant. I have known the shower bath to be of great benefit to the Hypochondriac, not only by the invigorating effects of reaction, causing a salutary and agreeable glow on the surface, but also by the shock which is communicated to the whole system.

The use of either of these measures should be followed by frictions with the flesh brush, or rough towels; it is almost impossible that the patient should feel otherwise than invigorated and refreshed after such a process. Frictions with fine dry salt — are also of use by imparting tone and vigour to the muscular and digestive — systems.

Exercise, so necessary to the health of every individual is not to be neglected in the management of Hypochondriasis. The patient however, is generally so indifferent to every prop — osition that can be made to him either for his pleasure or benefit, that it is often extre — mely difficult to get him to stir. But I have known individuals in this state, who after rousing them, and engaging them in some pleasant exercise in which there was something to be attained and sought after —

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to be entirely forgetful of their afflictions.

I have observed an Hypochondriacal person, who previously to his falling into that state, was remarkably fond of hunting, and who after being persuaded to exercise in this way, was very dull and languid untill an opportunity presented of trying his piece, and as soon as the game fell, he would brighten up and even exult for a short time, but presently after relapse into his former sad and complaining mood. Even so short an interval of enjoyment is worth seeking for.

There are numberless other modes of exercise, such as riding, sailing, the cultivation of a garden &c recommended, but all these should be directed to some object tending thereby to interrupt that morbid train of thought accompanying the disease. Care should also be taken to avoid —

-fatigue in the employment of any of them.

Cheerful company; entertaining books &c, are of service, for the reason above mentioned. There are times however, in which the patient cannot forbear making comparisons between his own wretched condition, & the cheerfulness and mirth of those around, rendering such company an injury to him instead of a benefit. As a general rule, the Hypochondriac must abstain {if possible} from his former occupations and habits of life; but, as an exception to this rule, I know an eminent Judge who is a complete victim to the disorder, and who is never so well as when engaged in hearing and trying causes. Long journies, where circumstances admit of them, are of utility, and they should be taken, when it is in the patients power, to a warmer climate than he has been accustomed to. Dr Rush advises,

that when such a person undertakes a voy-
-age of any kind, he should change every,
and even the minutest article of his dress &-
equipments; and on the same reasoning it
will no doubt be beneficial for him wheth
-er at home or abroad frequently to shift his
clothing; It is a practice not only refr-
-eshing and conducive to health, but it
serves as another mean of breaking the
chain of morbid association, and renders the
patient, as it were, a new man each
time. There are numberless other minute
circumstances to be attended to in the treat-
-ment of Hypochondriacal persons, but
owing to peculiarities and diversities which
may occur in particular cases, they can-
not of course be pointed out in the general
view of the subject which I have attemp
-ted to take. An apparent concurrence
however with our patient in his hallucinations

will prove rather beneficial than otherwise, as there are many accounts of their being completely cured by so doing.

I have now brought to a close the observations which I intended to make on this disease; and beg leave to submit them with much deference to the perusal of the Professors; aware as I am of the deficiencies in this production, I can only claim to myself the consciousness of good intentions; of an earnest desire of making future advances in my profession, in the practice of which I expect to find opportunities of acquiring by personal observations on the character of diseases, the habit of more correct thinking, and of a more lucid arrangement of my thoughts.

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